

FAX TRANSMITTAL COVER SHEET

RECEIVED
CENTRAL FAX CENTER

MAY 18 2004

TO: U. S. Patent and Trademark Office
Technology Center 1600
Attn: Examiner, Patricia A. Patten
Art Unit: 1654

FAX NO.: (703) 872-9306

DATE: May 18, 2004

FROM: Marcella D. Watkins

OFFICIAL

Conley Rose, P.C.
JPMorgan Chase Tower
600 Travis Street, Suite 7100
Houston, Texas 77002-2912

TELEPHONE: (713) 238-8000

FAX: (713) 238-8008

CLIENT NO.: 2026-00800 (SBI-073)

TOTAL NUMBER OF PAGES (INCLUDING THIS ONE) 53

COMMENTS: Re: U.S. Patent Application No. 09/746,921
Filing Date: December 22, 2000
Applicant: Kevin J. THORNE

The following documents are attached for filing:

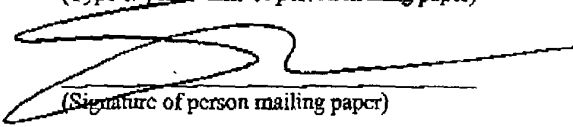
- Transmittal Form (PTO/SB/021) (1 p.)
- Fee Transmittal for FY 2004 (1 p.)
- Petition for Extension of Time Under 37 CFR (1 p.)
- Response to Office Action of November 18, 2003 (15 p.)
- Declaration of Kevin J. Thorne (7 p.)
- U.S. Patent No. 5,525,148 + 5,741,329

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being sent by facsimile transmission on the date shown below to the fax number above, to the U.S. Patent and Trademark Office, in accordance with 37 CFR § 1.6(d).

Date: May 18, 2004

Sandra K. Begley
(Type or print name of person mailing paper)


(Signature of person mailing paper)

This facsimile and the information it contains is intended to be a confidential communication only to the person or entity to whom it is addressed. If you have received this facsimile in error, please notify us by telephone.

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

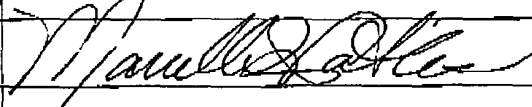
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/746,921
	Filing Date	December 22, 2000
	First Named Inventor	Kevin J. THORNE
	Art Unit	1654
	Examiner Name	Patricia A. Patten
Total Number of Pages in This Submission	Attorney Docket Number	SBI-073

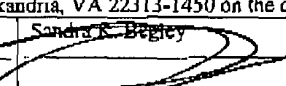
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <i>Facsimile Transmittal Cover Sheet</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Marcella D. Watkins 36,962
Signature	
Date	May 18, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendments, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	Sandra R. Begley	Date	May 18, 2004
Signature		Date	May 18, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for

PTO/SB/017 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL
For FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** \$ 950.00**Complete if Known**

Application Number	09/746,921
Filing Date	December 22, 2000
First Named Inventor	Kevin J. THORNE
Examiner Name	Patticia A. Patten
Art Unit	1654
Attorney Docket No.	SBI-073

METHOD OF PAYMENT (Check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:
Deposit Account Number: 03-2769
Deposit Account Name: Conley Rose, P.C.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account
☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1301 770	2001 385	Utility filing fee	\$
1302 340	2002 170	Design filing fee	\$
1303 330	2003 265	Plant filing fee	\$
1304 770	2004 385	Reissue filing fee	\$
1305 160	2005 80	Provisional filing fee	\$

SUBTOTAL (1) \$**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**


Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	3**	18.00	\$
Multiple Dependent		290.00	\$ 00.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent Claims in excess of 3
1203 290	2203 145	Multiple dependent claims, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Marcella D. Watkins	Registration No. (Attorney/Agent)	36,962	Telephone	(713) 238-8000
Signature				Date	May 18, 2004

Complete (if applicable)**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-0PTO-9199 (1-800-786-9199) and select option 2.

126051 01/2006 M800

PTO/SB/23 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) SBI-073
	In re Application of	Kevin J. THORNE
	Application Number	09/746,921 Filed December 22, 2000
	For Composition and Process for Bone Growth and Repair	
	Group Art Unit 1654	Examiner Patricia A. Patten

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1)) \$

☐ Two months (37 CFR 1.17(a)(2)) \$

☒ Three months (37 CFR 1.17(a)(3)) \$950

☐ Four months (37 CFR 1.17(a)(4)) \$

☐ Five months (37 CFR 1.17(a)(5)) \$

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

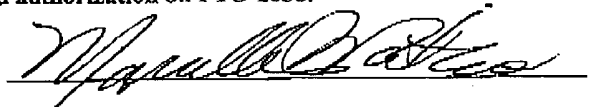
☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2769.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor
☐ assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ attorney or agent of record. Registration Number 36,962
☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

May 18, 2004
Date


Marcella D. Watkins
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance